

BEST AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

51A- P033

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	27	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20= *	7
INDEPENDENT CLAIMS	12 minus 3= *	9
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	63
X40=	360
+135=	<input type="checkbox"/>
TOTAL	778

RATE	FEE
BASIC FEE	710.00
X\$18=	<input type="checkbox"/>
X80=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	<input type="checkbox"/>
X40=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$18=	<input type="checkbox"/>
X80=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	<input type="checkbox"/>
X40=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$18=	<input type="checkbox"/>
X80=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	<input type="checkbox"/>
X40=	<input type="checkbox"/>
+135=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$18=	<input type="checkbox"/>
X80=	<input type="checkbox"/>
+270=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.